1 Land Information

Forest Crop Law Transfer of Ownership and Acceptance of Transfer

Form 2450-035 (R 11/03)

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Mail completed form to the DNR Forester in the county* where the land is located. For a list of service center addresses call (608) 266-2621 or visit www.dnr.state.wi.us/org/caer/cs/servicecenter/ssbycounty.htm.

Notice: Pursuant to 77.10(1)(b), Wis. Stats., a completed version of this form with attchments must be submitted to the Department within 10 days of the date of the deed. **Failure to submit this form may result in withdrawal from the program and the assessment of a withdrawal tax.**

Personal information will be used to administer the Forest Crop Law program and for educational efforts. The Department is also required to provide this information to requesters under the Wisconsin Open Records Law, ss. 19.31-19.39, Wis. Stats.

| The following descriptions | of land enrolled und | ler the Forest Crop Law | (Chapte | er 77, Wis. Stats.) hav | e been sold | or trans | sferred. | | | | |
|---|-----------------------|---|---------|---|----------------------|-----------|-------------------------------|----------|--|--|--|
| FCL Order Number | | For lands enrolled under this FCL order number, this is a: (select one) | | | | | | | | | |
| | | partial transfer - | Note: | Lands transferred in | part must m | neet tran | sfer require | ments. | | | |
| File a separate form for each | order number. | entire transfer | | If those requirements withdrawal with the a | ssessment | of a with | nd is subject ndrawal tax. | τιο | | | |
| *County | | Town or Village | | | Township N | Number | Range I | □E □W | | | |
| List description(s) and acre | eages Attach addition | nal pages if needed | | | | | • | | | | |
| Example: Section 10 | NE 1/4 NE 1/4 4 | 0 acres | | | | | | | | | |
| | Gov Lot 1 5 | 3.34 acres | | | | | | | | | |
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| 2. Former Owner Informa | ation | | | | | | | | | | |
| Name of Former Owner(s) | | | | | | | | | | | |
| | | | | | | | | | | | |
| Street | | | City | | | State Z | IP Code | | | | |
| | | | | | | | | | | | |
| 3. New Owner Contact In | formation | | | | | | | | | | |
| Name of New Owner Contact – Correspondence from the DNR will be | | | | this individual | Daytime ¹ | Telepho | ne Number | | | | |
| Street | | | City | | | State Z | IP Code | | | | |
| | | | | | | | | | | | |

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| 4. New Owner(s) Acceptance and Agreem | ent – All nev | v owners must read and co | mplete the foll | owing: | | | | | | | |
|---|---|------------------------------|------------------------|---------------------|--------------------------|--|--|--|--|--|--|
| Under and in accordance with s. 77.10(1)(b), | Wis. Stats.: | | | | | | | | | | |
| a. I accept the transfer of the Forest Cro | a. I accept the transfer of the Forest Crop Law entry and contract. | | | | | | | | | | |
| b. I certify an intention to continue to pra- | ctice forestry | / on such land. | | | | | | | | | |
| c. I agree to comply with all of the terms of the Forest Crop Law and the contract applicable to the said land, including the payment of the severance taxes, the annual acreage share and any withdrawal tax. | | | | | | | | | | | |
| d. If your land was acquired on or after January 1, 1986, complete the following: Were you married at the time of acquisition? No Yes If yes, spouse(s) must also sign the petition below. | | | | | | | | | | | |
| Names and Signatures of New Owner(s). Include the names and signatures of <u>all</u> new owners (includes life estate holders). Attach additional sheets if necessary. | | | | | | | | | | | |
| Name of New Owner (please print) | Signature | | _ | Spouse Signatur | re | | | | | | |
| Name of New Owner (please print) | Signature | | Date Signed | Spouse Signatur | re | | | | | | |
| Name of New Owner (please print) | ne of New Owner (please print) Signature | | Date Signed Spouse Sig | | gnature | | | | | | |
| Name of New Owner (please print) | Signature | | Date Signed | Spouse Signatur | re | | | | | | |
| Name of New Owner (please print) | Signature | | Date Signed | Spouse Signatur | re | | | | | | |
| Name of New Owner (please print) | Signature | | Date Signed | Spouse Signatur | re | | | | | | |
| Name of New Owner (please print) | Signature | | Date Signed | Spouse Signature | | | | | | | |
| 5. Land Encumbrances | | | | | | | | | | | |
| Select the statement which is certified to be to No, there is no lien, encumbrance or la Yes, there is a lien, encumbrance or la | and contract | on this property. | | | | | | | | | |
| Name of Institution or Vendor of Land Contra | Signature | | | Date Signed | | | | | | | |
| Name of Institution or Vendor of Land Contra | Signature | | | Date Signed | | | | | | | |
| Note: A signature by the encumbrance holde transfer of this Forest Crop Law land of the mortgage lien or encumbrance rigle | or with its ass | sociated management. The | | | | | | | | | |
| 6. Required Attachments | | | | | | | | | | | |
| The following attachments are required to proincomplete and will be returned to the landow | ner for comp | pletion. | | - | | | | | | | |
| Proof of ownership. Enclose a copy of | the deed or | land contract giving you int | erest or owner | rship in the land p | petitioned for transfer. | | | | | | |
| Parcel ID number(s). Enclose a copy of the tax bill(s) or other document(s) showing the county tax parcel identification number(s). | | | | | | | | | | | |
| For Department Use Only | | | | | | | | | | | |
| DNR Forester Signature | | | Date | Signed | | | | | | | |